

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | 11 H | 10 | 7/16 |
| O.I.P.E. CLASSIFIER | | | 08/20/01 |
| FORMALITY REVIEW | A.T | 1071 | |
| RESPONSE FORMALITY REVIEW | 11 H | 825 | 11/09/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|---------|
| 1 | 7/29/01 |
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| 34 | ✓ |
| 35 | ✓ |
| 36 | N |
| 37 | N |
| 38 | ✓ |
| 39 | ✓ |
| 40 | ✓ |
| 41 | N |
| 42 | ✓ |
| 43 | ✓ |
| 44 | ✓ |
| 45 | ✓ |
| 46 | N |
| 47 | N |
| 48 | ✓ |
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| Claim | Date |
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| 49 | 7/29/01 |
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If more than 150 claims or 10 actions
staple additional sheet her

(LEFT INSIDE)

11/10/01
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